24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	PAGE 1 OF 2 FOR SE OF FORM 24/48		
NAME OF COMMITTEE (In Full) Senate Conservatives Fund	FEC IDENTIFICATION NUMBER ▼ C C00448696		
Check if 24-hour report X 48-hour report New report Amends report filed on			
Full Name of Payee Envision Printers/Marketing	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address 2 Riverbend Pkwy	Amount		
City State Zip Code Leesburg VA 20176-0000	6915.89 Transaction ID: ECE9B41185C044CB2A3A Date of Disbursement or Obligation		
Purpose of Expenditure IE-Ernst-Direct Mail Production Category/ Type	10 03 / 2014		
Name of Federal Candidate Support Office	e Sought: House District:		
Calendar Year-To-Date Per Election for Office Sought Disb 2014	ursement For: Primary General ✓ Other (specify) ► General 2014		
Full Name of Payee Senate Conservatives Fund	Date of Public Distribution/Dissemination 10 04 2014		
Mailing Address PO Box 388	Amount		
City State Zip Code Alexandria VA 22313-0388	1030.45 Transaction ID : E3AD5A8E08573456496D Date of Disbursement or Obligation		
Purpose of Expenditure IE-Ernst-Online Processing Category/ Type	10 04 7 2014		
Name of Federal Candidate Joni K Ernst Oppose Office	e Sought: House District: President Senate State: IA		
Calendar Year-To-Date Per Election for Office Sought Disb 2014	ursement For: Primary General Y Other (specify) ► General 2014		
(a) SUBTOTAL of Itemized Independent Expenditures	7946.34		
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Paul Kilgore [Electronically Filed] Date	10 09 7 2014		
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24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	.5	PAGE 2 OF 2 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼	
Senate Conservatives Fund		C C00448696	
Check if 24-hour report X 48-hour report New report Amends report filed on			
Full Name of Payee	Date	of Public Distribution/Dissemination	
Jamestown Associates		10 09 7 2014	
Mailing Address 5 Mapleton Rd Ste 300	Amou	unt	
City State Zip Coc	de	2500.00	
Princeton NJ 08540-		saction ID: ED36853B93175429B846 of Disbursement or Obligation	
Purpose of Expenditure IE-Ernst-Media Production Category T	ory/ Type	10 07 / 2014	
Name of Federal Candidate	X Support Office Sough	nt: House District:	
Joni K Ernst	Oppose Presid		
Calendar Year-To-Date Per Election for Office Sought 215426.3	Disbursemer 2014	nt For:	
Full Name of Payee Rapid Response Television		of Public Distribution/Dissemination	
Mailing Address 4850 Wright Rd	Amou		
Ste 168			
City State Zip Coo		14750.00	
Stafford TX 77477- Purpose of Expenditure	Date	of Disbursement or Obligation	
IE-Ernst-Media Buy	ory/ Type	10 07 / 2014	
Name of Federal Candidate	Support Office Sough	ht: House District:	
Joni K Ernst	Oppose Presid	lent Senate State: IA	
Calendar Year-To-Date Per Election for Office Sought 2154:	26.35 Disbursemer 2014	nt For: Primary General Other (specify) ► General 2014	
(a) SUBTOTAL of Itemized Independent Expenditures		17250.00	
		7 1 7 1 7 1	
(b) SUBTOTAL of Unitemized Independent Expenditures	• • • • • • • • • • • • • • • • • • •	7 7 7	
(c) TOTAL Independent Expenditures	······································	25196.34	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Paul Kilgore [Electronically Fil	ded] Date 10	09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Signature			